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Attorney's Docket No. <u>033364-280</u>

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	) BOX AF
AHL et al.	) Group Art Unit: 1615
Application No.: 09/398,934	) Examiner: G. Kishore
Filed: September 1, 1999	)
For: REDUCTION OF LIPOSOME- INDUCED ADVERSE PHYSIOLOGICAL REACTIONS	) ) ) )

## AMENDMENT AND REPLY TRANSMITTAL LETTER

Assistant Commissioner for Patents Washington, D.C. 20231

[ ] No additional claim fee is required.

Sir:

Enclo	sed is an Amendment and Reply for the above-identified patent application.				
[X]	A Petition for Extension of Time is also enclosed.				
[]	A Terminal Disclaimer and a check for [ ] \$55.00 (248) [ ] \$110.00 (148) to cover the requisite Government fee are also enclosed.				
[]	Also enclosed is				
[X]	Small entity status is hereby claimed.				
[]	Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$355.00 (279) [] \$710.00 (179) fee due under 37 C.F.R. § 1.17(e).				
	[ ] Applicant(s) previously submitted, on, for which continued examination is requested.				
[]	Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.				
[]	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (146/246) is also enclosed.				



Amendment/Reply Transmittal Letter Application No. 09/398,934 Attorney's Docket No. 033364-280

Page 2

[] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS 53 =		× \$18.00 (103) =	
Independent Claims		MINUS =		× \$80.00 (102) =	
If Amendment adds mu	ltiple depende	ent claims, add \$270	0.00 (104)		
Total Amendment Fee					
If small entity status is	claimed, subt	ract 50% of Total A	mendment Fe	e	

L 7	E	]	A claim	fee	in the	amount	of \$	is enclosed.
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[ ] A claim fee in the amount of \$\_\_\_\_\_ is enclosed.

[ ] Charge \$\_\_\_\_ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R.

§§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: August 27, 2001